ARIZONA HOUSE OF REPRESENTATIVES Fifty-fifth Legislature - Second Regular Session

TEEN MENTAL HEALTH HOUSE AD HOC COMMITTEE

Report of Interim Meeting Monday, July 11, 2022 House Hearing Room 1 -- 9:00 A.M.

Members Absent

Representative Hernandez

Dr. Chhatwal

Dr. Kirkilas

Pastor Nunez

Ms. Guy

Convened

9:04 A.M.

Recessed

Reconvened

Adjourned 11:53 A.M.

Members Present

Representative Osborne, Chairman

Representative Grantham

Ms. Blalock

Ms. Breitwieser Cutshall

Ms. Coggins

Ms. Corieri

Ms. Espino

Ms. Godbehere

Mrs. Harrison

Ms. Jones Mellon

Ms. McPherson

Ms. McWilliams

Mr. Sampson

Sergeant Tyler

Agenda

Original Agenda - Attachment 1

Committee Attendance

Report - Attachment 2

Presentations

Name	Organization	Attachments (Handouts)
Colonel Silbert	DPS	3
Courtney Acosta, Jean	ADE	4
Ajamie, Rebecca Astorga		
Sheila Sjolander	ADHS	5
Dr. Megan Woods	AHCCCS	6

Julie Ryberg, Committee Secretary

July 11, 2022

(Original attachments on file in the Office of the Chief Clerk; video archives available at http://www.azleg.gov)

ARIZONA HOUSE OF REPRESENTATIVES

INTERIM MEETING NOTICE OPEN TO THE PUBLIC Convened 9:04 cm Adjourned 11:53 cm

TEEN MENTAL HEALTH HOUSE AD HOC COMMITTEE

Date: Monday, July 11, 2022

Time: 9:00 A.M.

Place: HHR 1

AGENDA

- 1. Call to order
- 2. Roll call
- 3. Welcome & introductions
- 4. Presenters:
 - · Department of Public Safety
 - o Colonel Silbert, Director
 - Arizona Department of Education—ADE Supports for Student Mental Health
 - Courtney Acosta, Director of Policy and Legislative Affairs
 - Arizona Department of Health Services Youth Mental Well-Being
 - o Sheila Sjolander, Assistant Director, Public Health Prevention Services
 - Arizona Health Care Cost Containment System Behavioral Health Services
 - o Dr. Megan Woods, Integrated Care Administrator
- 5. Committee discussion
- 6. Next steps
- 7. Adjournment

Members:

Representative Joanne Osborne, Chair Representative Travis W. Grantham, Co-Chair Representative Alma Hernandez Jennifer Blalock Lisa Breitwieser Cutshall Dr. Jasleen Chhatwal Bernadette Coggins Christina Corieri Candy Espino Gina Godbehere

Kristina Guy
Sally Harrison
Shelley Jones Mellon
Dr. Gary Kirkilas
Katey McPherson
Kimberly McWilliams
Pastor Ryan Nunez
Solomon Sampson
Sergeant Sean Tyler

07/05/2022

ra

People with disabilities may request reasonable accommodations such as interpreters, alternative formats, or assistance with physical accessibility. If you require accommodations, please contact the Chief Clerk's Office at (602) 926-3032 or through Arizona Relay Service 7-1-1.

ARIZONA STATE LEGISLATURE
Fifty-fifth Legislature - Second Regular Session COMMITTEE ATTENDANCE RECORD

COMMITTEE	E ON	AD HOC COMMITTEE ON TEEN MENTAL HEALTH						
CHAIRMAN: Je		Joanne Osborne	Joanne Osborne VICE-CHAIRMAN:			Travis Grantham		
	DATE		7/11/22	/22	/22	/22	/22	
CONVENED		9:04 am	m	m	m	m		
RECESSED								
RECONVENED								
ADJOURNED		11:53 an						
MEMBERS	:							
Hernandez, A			176m, 201 2 300					
Ms Corieri,	C		V	7				
Ms Blalock,	J		V					
Ms Breitwie	ser-Cut	shall, L	V					
Dr. Chhatwa	1, J			1-E 4.00; 301F				
Ms Coggins, B		V						
Ms Espino, C		V						
Ms Godbehere, G		V						
Ms Guy, K			agi comp vol-					
Ms Harrison, S		V						
Ms Jones Mellon, S		V						
Dr. Kirkilas, G			جد سے بیء					
Ms McPherson, K		V						
Ms McWilliams, K		V						
Pastor Nunez, R			مدد سه ردیه					
Mr Sampson, S		V						
Sgt. Tyler, S		V						
Grantham T, Vice-Chairman				į.				
Osborne, J, C	Chairma	n	V					
		√ Preser	nt	Absent	exc	Excused	<u> </u>	

LAW ENFORCEMENT PERSPECTIVE OZ IFFN DRUG USE

DIRECTOR COLONEL HESTON SILBERT

ARIZONA DEPARTMENT OF PUBLIC SAFETY



OOZING FACIONS

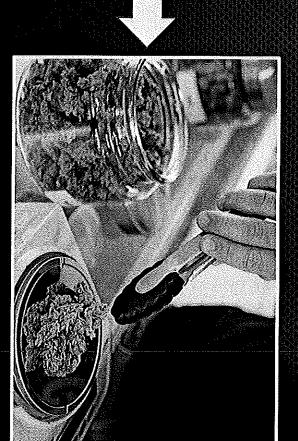
NORWALIZATION

STIGMATISM

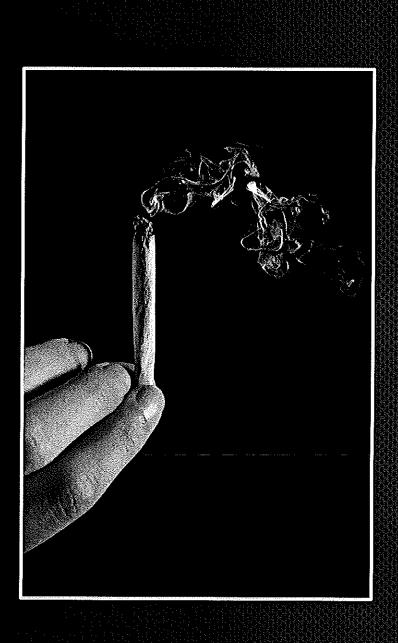
RORMALIZATON: MARJUANA



2010: Medical



2020: Recreational



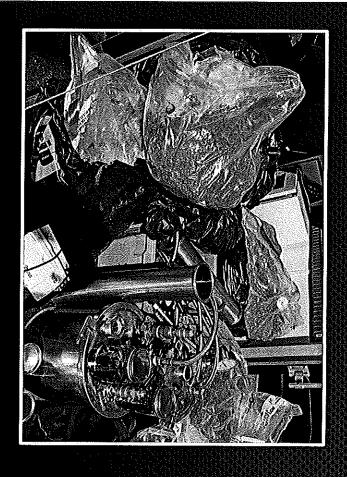
SIGMAISM: MARIJOANA

SIONAISM: MARIUANA

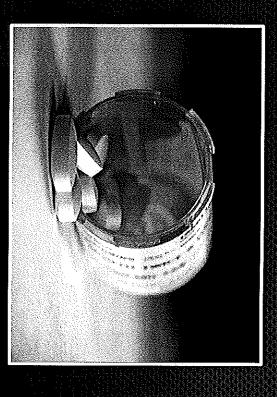


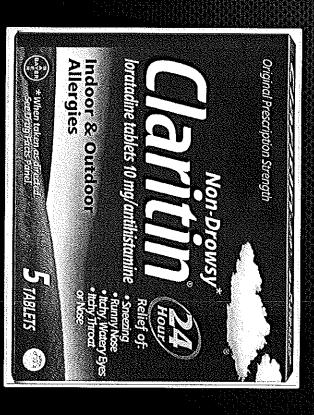


SCUTI: MARIE

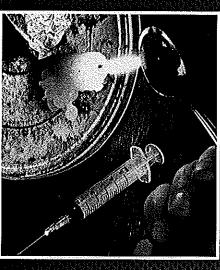


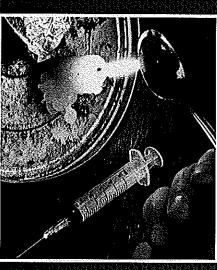






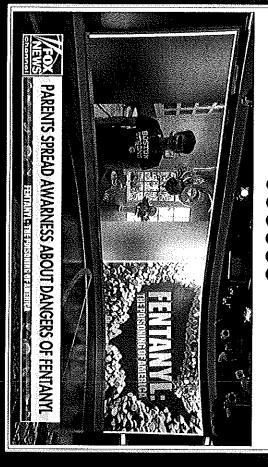
SICNAISM: FINANYE

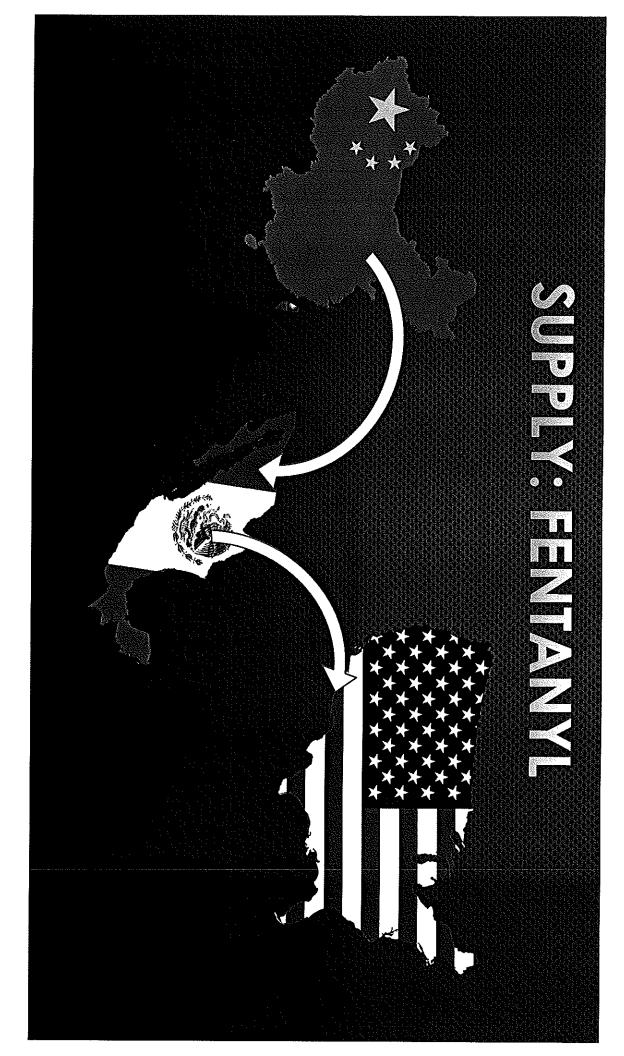




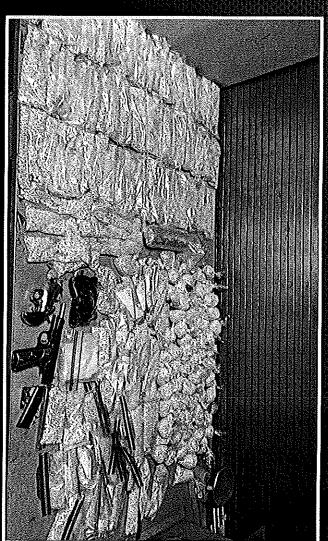
Complete shock that 17-year-old died Fentanyl victim's mother speaks out: from accidental ingestion

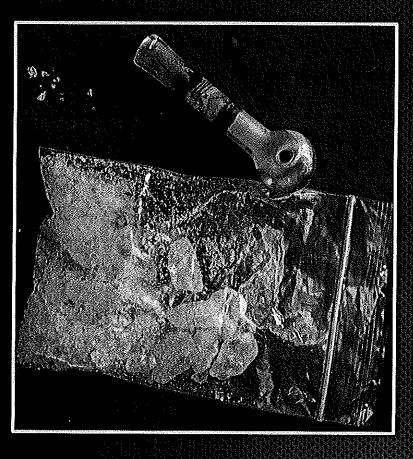
17-year-old Zach Didier died in December 2020



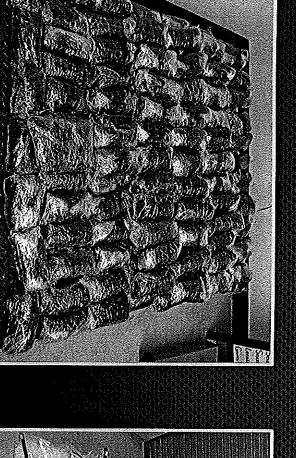




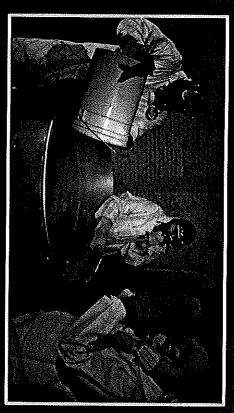




"Meth today is stronger, cheaper and far more plentiful than the old home-cooked variety."













Ad Hoc Committee on Teen Mental Health Support for Student Mental Health

July 11, 2022

AD HOC COMMITTEE ON TEEN MENTAL HEALTH

SECTION 1

Student Advisory Council



Mental health is the #1 issue the Student Advisory Council brings to us every year.

- The inaugural Student Summit lead by the Student Advisory Council focused more on mental health than any other topic.
- Mental health is consistently a topic of concern when our Student Advisors speak at the monthly State Board of Education meetings.
- The following are solutions that our Student Advisors advocate for:
- Additional school counselors
- Expand peer support groups
- Suicide prevention training and first aid for youth mental health

AD HOC COMMITTEE ON TEEN MENTAL HEALTH

SECTION 2

School Safety & Social Wellness



Educator & Community Training

School Safety Program

- 467 school mental health professionals trained
- Topics: community resources, MTSS, family engagement, verbal deescalation, role of the school counselor/social worker

Emergency Preparedness Program

- Crisis intervention and response
- 22 state trainers; 6 trainings in May/June, 141 trained
- 35 workshops in SY22-23 in at least 3 regions of the state
- Threat assessment team protocol
- 12 state trainers; sponsoring one workshop/month during SY22-23

School Health & Wellness/Arizona School Nurse Access Program

Addressing mental health needs of students

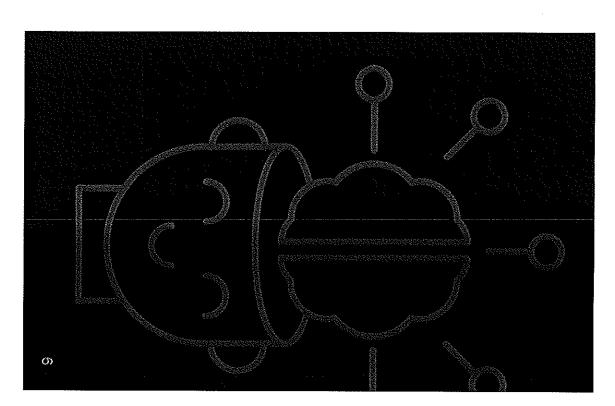


through infrastructure & policy development Infrastructure: Removing barriers to mental health supports

community Professional Development & Training: Including mental health awareness and suicide prevention for school personnel & the

- + 32,000 trained in mental health prevention/promotion;
- + Nearly 90% reported increased knowledge & confidence to respond

supportive environments. Engagement: Strengthening partnerships and collaborations to normalize the conversation of mental health; creating safe and



Project AWARE State & National Partnerships Provide Best Practices & Resources

School & Behavioral Health Partnerships:

A Resource Guide





ADE Mental Health & Wellness
School & BH Partnerships Guide



School Health Assessment and Performance Evaluation System

School and Districts can use SHAPE to:

- Evaluate strengths and identify areas of growth using the School Mental Health Quality Assessment
- Document mental health services across tiers of support
- Use a robust resource center and quality guides to guide school mental health quality improvement efforts

Engage their school mental health team in meaningful, data-driven, strategic quality improvement

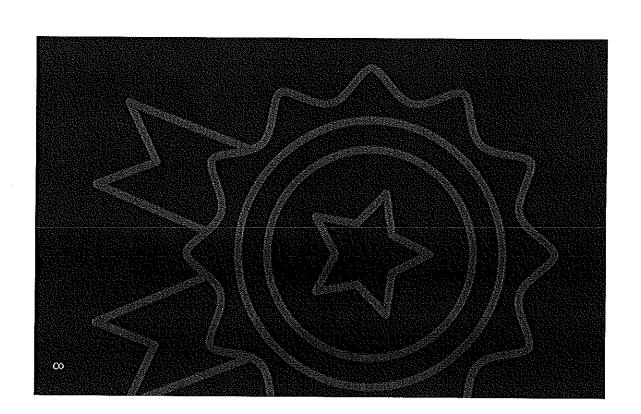
States can use SHAPE to:

- Learn more about the quality of school mental health in schools and districts the state
- Monitor progress in school mental health across districts and schools in the state
- Use the State School Mental Health Profile to assess several school mental health indicators including: infrastructure, technical assistance and training, state policies, financing, staffing, and emerging SMH issues.

TheSHAPESystem.com

AWARE Partner School Outcomes

- Progress towards comprehensive systems of mental health supports for students within 7 domains (i.e., Teaming, Mental Health Promotion, Early Intervention...)
- Development of aligned goals and activities
- Documentation of process improvement through annual completion of the School Mental Health Quality Assessment in the SHAPE System





support that extends beyond just teachers, friends, and family... Now, more than ever is when my fellow Arizona students need resources for schools are going to make a huge difference for students and teachers also need the support of professionals such as counselors and social workers. These newly funded so many students across the state.

Claire Novak

2021 Senior from the Arizona School of Arts



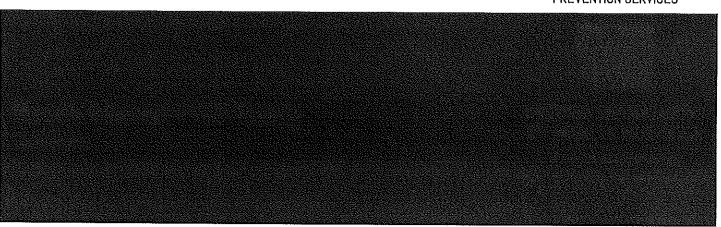
Thank You

Courtney Acosta, Director of Policy & Legislative Affairs Jean Ajamie, Deputy Associate Superintendent of School Safety & Social Wellness Rebecca Astorga, School Safety & Social Wellness Specialist

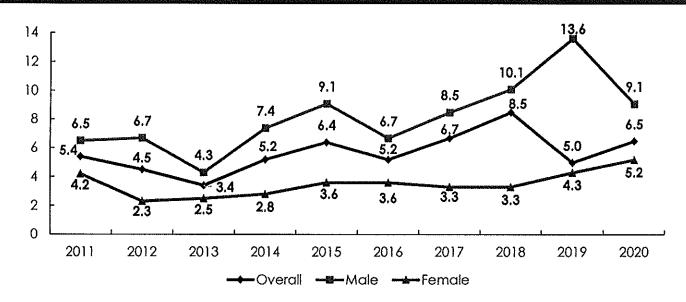
Youth Mental Well-Being

June 24, 2022





Mortality Rate per 100,000 Children due to Suicide by Gender, Ages 10-17 Years, Arizona, 2011-2020



2020 Child Falality Review Program Report

Adolescent Suicides

An adolescent death (10-17 years) that is due to a self-directed intentional behavior where the intent is to die because of that behavior.

There were 42 adolescent suicides in 2021.

Approximately 3% of all suicides in Arizona are to adolescents.



There were 49 suicides in 2020,

There was a 30% increase in the suicide rate from 2019 to 2020.

100% of suicides were preventable.

#1 cause: Strangulation (n= 25) #2 cause: Firearm Injury (n= 18) #3 cause: Poisoning (n= 4)



Of the suicides, 71% were male and 29% were female.



65% of suicides occurred in children ages 15-17 years.



American Indian/Alaskan Native, Black/African American and White children were disproportionately affected, American Indian/Alaskan Native, Black/African American and White children made up 16%, 8% and 43% of suicides but only make up 6%, 5% and 41% of the total population, respectively.



20% of suicides involved substance use.

2020 Child Fatality Review Program Report

Factors that may have contributed to the Child's Despondency Prior to Suicide, Arizona, 2020

Risk Factors*	Number	Percent
Relationship Problems	34	69%
Access to Firearm	18	37%
History of Maltreatment	18	37%
Child Mental Health Disorder	18	37%
School Issues	16	33%
*More than one risk factor may have been identified for each de	eath	of pronou must a finite emblocation of the temporal production of the finite hand and the second of the second

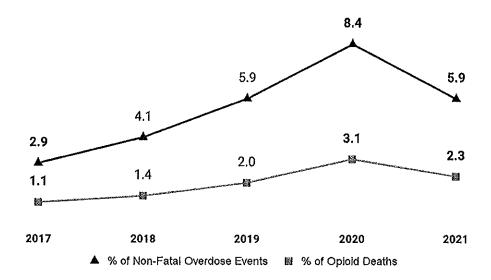
2020 Child Fatality Review Program Report

Non-Fatal Overdose and Opioid Deaths among Children (0-17 yrs) per Year

In 2021 there were...

56 verified non-fatal opioid overdose events in children ages 0-17

46 opioid deaths occured in children ages 0-17



Arizona - Medical Electronic Disease Surveillance Intelligence System (MEDSIS)

Child Substance Use Related Deaths

Substance use related deaths are where the child or any individual involved in the death of the child used or abused substances, such as alcohol, illegal drugs, and/or prescription drugs and this substance use was a direct or contributing factor in the child's death.



There were 157 substance use related deaths in 2020.

There was a 32% increase in the substance use related death rate from 2019 to 2020.

100% of substance use related deaths were preventable.

#1 cause: Poisoning (n= 66) #2 cause: Firearm (n= 22)

#3 cause: MVC (n= 21)

Of the substance use related deaths, 66% were male and 34% were female.

53% of substance use related deaths occurred in children ages 15-17 years.

American Indian/Alaska Native and Black/African American made up 15% and 13% of substance use related deaths, respectively, but only make up 5% and 6% of the total population, respectively.

Of the 66 poisoning deaths, 60 were opiate overdoses and fentanyl was responsible for 57 of oplate poisonings.

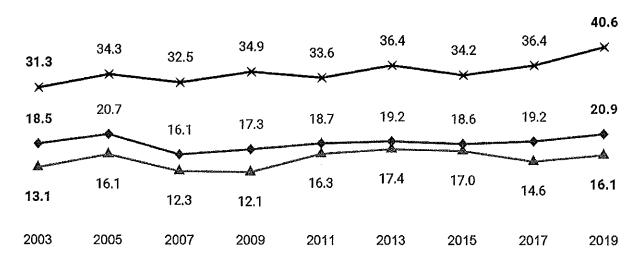


Risk Factors for Substance Use Related Deaths, Ages 0-17, Arizona, 2020

Risk Factors*	Number	Percent
Prior: History with CPS	90	57%
Parent History of Substance Abuse	73	46%
Poverly	47	30%
History of trauma	41	26%
Housing Insecurity	23	15%
*More than one risk factor may have been identified for e	ach death	

2020 Child Fatality Review Program Report

Percentage of High School Students Who...



Arizona - Youth Risk Behavior Survey - 2019

Youth Mental Well-being

Highlighted Actions



9

Arizona Health Improvement Plan Mental Well-being Priority

- Opioid use & overdose fatalities
- Social Isolation & Loneliness
- Suicide

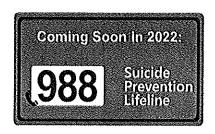
azdhs.gov/azhip

Social Connectedness: azhealth.gov/StartAConversation



Suicide Prevention Action Plan

- Recommendation 1: Promote the availability of state crisis resources
- Recommendation 2: Disseminate information inside of Arizona to inform communities about current best practices, innovative approaches to address suicide, and available prevention training and resources
- Recommendation 3: Increase access to resources and services for individuals and communities that have experienced suicide
- Recommendation 4: Increase number of passive suicide sensors in Arizona





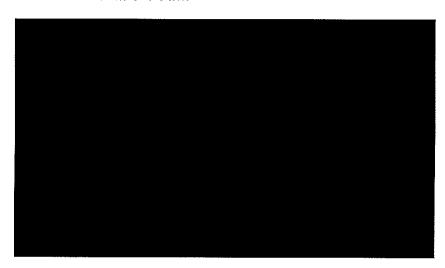
Suicide Prevention Action Plan

- Recommendation 5: Enhance suicide mortality data collection and expand surveillance systems to identify current community trends
- Recommendation 6: Priority Populations
- Recommendation 7: Engage stakeholders through event promotion and community-level prevention
- Recommendation 8: Improve the resilience of individuals and communities through upstream interventions



Bullying Prevention

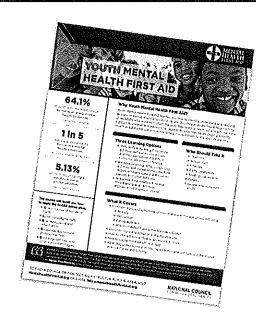
What Kind are You...



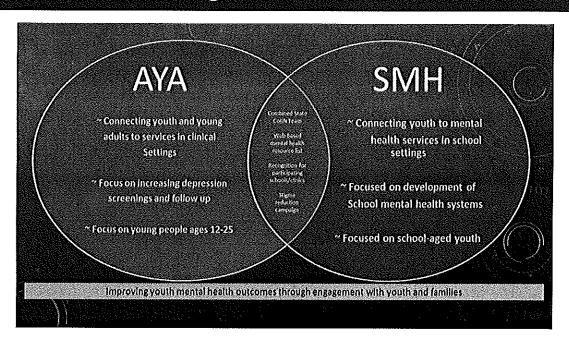


Youth Mental Health First Aid

- 32 Health Educators certified
- \$1,000 stipend per training
- Inter Tribal Council of Arizona Program
- Annual certification training



ADHS/ADE Adolescent & Young Adult Behavioral Health CollN



ADHS/ADE Adolescent & Young Adult Behavioral Health CollN

- Stigma reduction campaign
- Resource website designed by youth for youth
- Recognition for participating CollN schools & clinics



What's Next











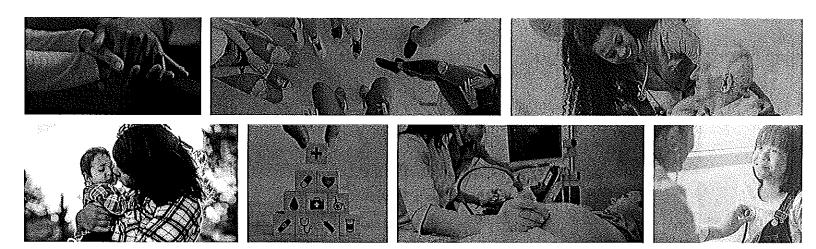
For More Information

azdhs.gov/suicide azdhs.gov/opioid

Sheila Sjolander, MSW
Assistant Director
Division of Public Health - Prevention

sheila.sjolander@azdhs.gov





Behavioral Health Initiatives for Children & Adolescents

Dr. Megan Woods, Integrated Care Administrator

House Ad Hoc Committee on Teen Mental Health June 24, 2022



AHCCCS-Covered Behavioral Health Services Include:

- Behavioral Health Day Programs including supervised day programs, therapeutic day programs, medical day programs;
- Crisis Services including mobile team services, telephone crisis response, urgent care;
- Inpatient Services including hospital, sub-acute, and residential treatment;
- Rehabilitation Services including living skills, cognitive rehabilitation, supported employment, and education support;
- Health Promotion Prevention, Education and Medication Training education and standardized training for the purpose of increasing an individual's behavioral knowledge of a health related topic such as medication management, the nature of an illness, relapse and symptom management, stress management, parenting skills and health lifestyles;



AHCCCS-Covered Behavioral Health Services Include:

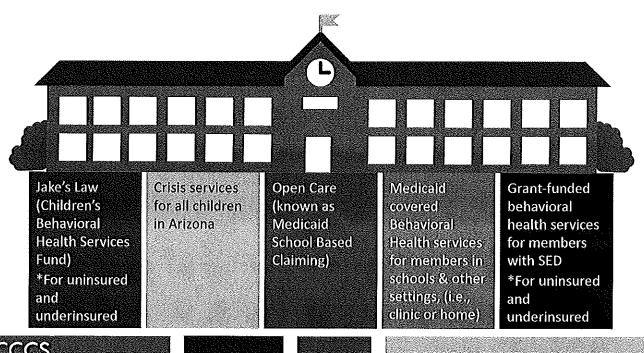
- Residential Behavioral Health Services including a range of up to 24hr/day services in a structured living environment for individuals needing support;
- Support Services including case management, personal assistance, Family & Peer Support, therapeutic foster care, respite, housing support, interpreter services, transportation, assistance accessing community resources and locating and applying for benefits, child care connections; and
- Treatment Services including counseling, consultation, assessment and specialized testing, and substance abuse treatment.

AHCCCS System of Care Initiatives

- Child and Family Team (CFT)
 Training and Fidelity
- National Wraparound Initiative
- Behavioral Health Clinical Chart Audits
- Published new AHCCCS policies for additional guidance in children's behavioral health services

- Whole Person Care Initiative
- Adolescent mobile crisis team pilot
- AZ Educator Peer Support Program
- Developing Youth Peer to Peer Support
- Implementation of service acuity assessment

AHCCCS School Based Initiatives



AHCCCS

9

Jake's Law (Children's Behavioral Health Services Fund)

- SB 1523 (2020) appropriated \$8M for behavioral health services for uninsured/underinsured children when referred to services from participating schools.
- Since June 2021, 260 schools have sent in referrals, resulting in 670 total referrals.
- The number of children served has increased significantly each month
 - o In May 2022 there were 551 children served.

Medicaid School Based Claiming (MSBC)

As of October 1, 2021:

- Broadened array of health care services is available
- MSBC now covers services for all Medicaid enrolled students, those with Individualized Family Service Plans and those with other plans of care for medically necessary services, in addition to an Individualized Education Program
- Addition of several provider specialties

Project A.W.A.R.E



3 Goals of the AWARE Grant



GOAL#1: Build and expand capacity at the state and local levels to improve access to mental health services and supports.



GOAL#2: Conduct outreach and training to increase mental health literacy and reduce stigma.



GOAL#3: Connect youth, families, and school staff to mental health services.





